MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.	FILING DATE
APPLICANT(S)	

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	\					
2		1				
3		1				
4		2				
5		2				
6		1				
7		1				
8		1				
9		1				
10		2				
11		1				
12		1				
13		1				
14		2				
15		1				
16		1				
17		1				
18		1				
19		1				
20		(1)				
21		2				
22		1				
23		1				
24		1				
25		1				
26		1				
27		1				
28		1				
29		2				
30		2				
31		2				
32		2				
33		2				
34		2				
35		2				
36		2				
37		2				
38		2				
39		1				
40		2				
41		1				
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	1					
TOTAL DEP.	56					
TOTAL CLAIMS	57					

		IND	DEP	IND	DEP	IND	DEP
	51						
	52						
	53						
	54						
	55						
	56						
	57						
	58						
	59						
	60						
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	95						
	96						
	97						
	98						
	99						
	100						
	TOTAL IND.						
	TOTAL DEP.						
	TOTAL CLAIMS						

$$\begin{array}{r} 24 \\ 32 \\ \hline 56 \end{array}$$